



VOLUNTEER PROJECT PLANNING FORM

Please fill out the form and send it to appropriate local DNR staff at least 30 days prior to the project event date. If you have questions, please contact the local DNR staff.

Event Date(s): _____ Number of Volunteers: _____

Start Time: _____ End Time: _____

Project Contact Person: _____ Phone Number: _____

Organization: _____ E-mail: _____

Project Task(s) Description. Please be specific.

Are there items you wish to have furnished by the DNR?

(Such as picnic table paint, garbage bags, etc.)

What items will be supplied by the organization/volunteers?

(Specify types of tools, refreshments, and safety gear such as gloves, glasses, sunscreen)

Are there special skills, knowledge or certifications that volunteers should have for the project?

(Examples: pesticide applicator's license, valid driver's license, have attended a special workshop or training, etc.)

Submitted by

Date

The project has been reviewed by:

Iowa DNR

Date